

2006-2007 REGULAR SESSION

ALTERNATIVE SECONDARY SCHOOL PROGRAM COMPLETE APPLICATION

School District Name: _____

Dist. #

Alternative School Name: _____

Alternative School Address: _____

If the above information is incorrect, please put one line through the incorrect information and write in the correct information.

Accreditation Status: ☐ State of Idaho ☐ NAAS (Formerly NASCU)

or

☐ Sponsoring Secondary School (Fill in below):

Alternative School
Program Administrator:

(Name - Typed or Printed) (Signature) (Date)

(Telephone Number) (Email Address)

Alternative School
Principal:

(Name - Typed or Printed) (Signature) (Date)

(Telephone Number) (Email Address)

School District
Superintendent:

(Name - Typed or Printed) (Signature) (Date)

(Telephone Number) (Email Address)

Note: Upon approval, funding is based upon average daily attendance (ADA) from the date the approved program began and the salary-based apportionment determined by mid-term units. As you complete this application, please respond in detail.

Application Deadline is July 31, 2006

Mail completed and signed form to: Lori Howard, State Department of Education, PO Box 83720, Boise ID 83720-0027

S.D.E. Use Only

Date Application Reviewed

Signature - Application Reviewer

Date Approved

Signature - State Superintendent of Public Instruction

LOCATION OF ALTERNATIVE SCHOOL PROGRAM

Please thoroughly describe site location:

Check the items that best describes the alternative school program:

_____ Grades 7 - 8 Program

_____ Grades 7 - 12 Program

_____ Grades 9 - 12 Program

_____ Other _____

(Please describe; i.e. 7-9, 8-9, etc.)

_____ Daytime program at a site other than regular secondary school

_____ Evening program at a site other than regular secondary school

_____ Evening program at a regular secondary school:

(Secondary School Name)

INTRODUCTION

Alternative secondary school programs are those that provide special instructional courses and offer special services to eligible at-risk youth, to enable them to earn a high school diploma. Some designated differences must be established between the alternative school programs and the regular secondary school programs. Alternative secondary school programs will include course offerings, teacher/pupil ratios and evidence of teaching strategies that are clearly designed to serve at-risk youth as defined in the Administrative Rules of the State Board of Education (IDAPA 08.02.03).

Alternative secondary school students completing a planned program for graduation must meet all local and state graduation requirements. Diplomas earned must be awarded by a local school district.

ELIGIBILITY

- I. Alternative Secondary Schools are a part of the public school system in the state, and as such provide another choice for students who are determined to be at-risk for completing high school and attaining a diploma. Criteria for at-risk students is defined in the Administrative Rules of the State Board of Education. (Reference URL address: <http://www2.state.id.us/adm/adminrules/rules/idapa08/08index.htm>)

A. Describe the procedure that will be used to determine if a student meets the criteria for an at-risk student.

B. Describe the process that will be used to enroll at-risk students.

INSTRUCTIONAL PROGRAM

- II. Describe how this 2005-2006 Alternative Secondary School Program will help students meet all local and state graduation requirements. Explain how the core academic program (language arts and communication, mathematics, science, and social studies) is aligned with the Idaho Achievement Standards, how student progress will be monitored and sources of evidence collected and reported. Graduation credit may be earned in the following areas: academic subjects, electives, and approved work-based learning experiences.

A. ACADEMIC GOALS:

For stand-alone accredited schools only:

_____ number of credits required to graduate from this school

_____ number of credits required to graduate from district's traditional high school

B. METHODS OF MONITORING STUDENT PROGRESS:

C. SOURCES OF EVIDENCE OF STUDENT PROGRESS:

REQUIRED COMPONENTS FOR ALL ALTERNATIVE SCHOOL PROGRAMS

- III. The following, Items A-D, **are required** components of all Alternative Secondary School Programs. Describe how they will be met with this program. (Items A-D are required of all alternative secondary schools per Administrative Rules of the State Board of Education.)

A. PERSONAL AND CAREER COUNSELING COMPONENT

B. PHYSICAL FITNESS/PERSONAL HEALTH COMPONENT

C. STATE DIVISION APPROVED PROFESSIONAL/TECHNICAL COMPONENT

D. INSTRUCTIONAL CHILD CARE COMPONENT WITH PARENTING SKILLS EMPHASIZED

(THIS IS A CURRICULUM COMPONENT. IT **IS NOT** ASKING ABOUT CHILD-CARE.)

OPTIONAL COMPONENTS FOR SECONDARY ALTERNATIVE SCHOOLS

- IV. Special services, where appropriate for at-risk youth enrolled in alternative secondary programs, may include a day care center when enrollees are also parents; direct social services that may include officers of the court, social workers, counselors/psychologists.

If applicable to this secondary alternative school, please describe the following special services:

A. DAY CARE CENTER STAFFED BY A QUALIFIED CHILD CARE PROVIDER

B. DIRECT SOCIAL SERVICES

POLICIES & PROCEDURES
GOVERNING THE PRACTICES OF THIS SECONDARY ALTERNATIVE SCHOOL

- V. Describe the following policies/procedures of this alternative secondary school. If the alternative secondary school uses the sponsoring high school policies or the school district policies, please include the relevant sections of these policies with this application.

A. MOTIVATION AND PROMOTING PUPIL SELF-ESTEEM

B. ATTENDANCE POLICY

C. DISCIPLINE POLICY

D. PARENT/COMMUNITY INVOLVEMENT

INSTRUCTIONAL CLASS SCHEDULE

VI. Complete the following instructional class schedule. Please include dates.
(Counselors should also be included in the schedule.)

1st Semester (Trimester) Dates: write dates of operation here			
Subject	Teacher	Days of the Week	Instructional Time
			to
			to
			to
			to
			to
			to
			to
			to
			to
2nd Semester (Trimester) Dates: write dates of operation here			
Subject	Teacher	Days of the Week	Instructional Time
			to
			to
			to
			to
			to
			to
			to
			to
			to
			to
3rd Semester (Trimester) Dates: write dates of operation here			
Subject	Teacher	Days of the Week	Instructional Time
			to
			to
			to
			to
			to
			to
			to
			to
			to
			to

VII. Anticipated Enrollment Information

List the school districts and schools from which enrollees are expected to come:

	Dist. No.	District Name	School Name
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

Complete the following information relating to anticipated enrollment from the above schools/districts.

Anticipated Enrollment							
	7th	8 th	9th	10th	11th	12th	Total
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total							